### **Upcoming Events**

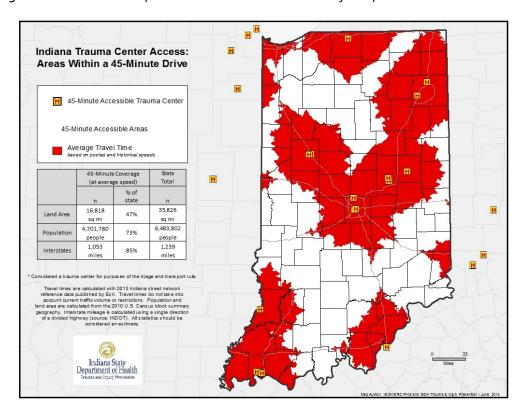
- July—National Fireworks Month
- Indiana State Trauma Care Committee (ISTCC) meeting, Indiana State Department of Health (ISDH) offices August 8, 10 a.m.
- Emergency Medical Services (EMS) Commission meeting August 20, 3 p.m.

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### New "In the Process" trauma centers named—update

The EMS Commission approved two additional hospitals as "in the process" trauma centers at the June 19 meeting: Good Samaritan Hospital in Vincennes and Community Hospital of Anderson in Anderson.



Continued (page 2)

#### New "In the Process" trauma centers named—update (continued)

Six Indiana hospitals—Indiana University (IU) Health Ball Memorial, Muncie; St. Elizabeth-East, Lafayette; St. Vincent-Anderson; IU Health Arnett, Lafayette; Good Samaritan, Vincennes; and Community Hospital of Anderson—have become trauma centers for purposes of the Triage and Transport Rule. The rule was adopted by the EMS Commission in mid-2012, requiring that seriously injured trauma patients be taken to trauma centers. The rule further defined "trauma centers" as hospitals "in the process of American College of Surgeons (ACS)-verification."

The red areas on the map (page 1) are those now within 45 minutes of a trauma center. Roughly 73 percent of Hoosiers can access a trauma center within 45 minutes and 85 percent of Indiana interstate miles are now within 45 minutes of a trauma center.

#### Injuries in Indiana 2007-2010 Report

The Division of Trauma and Injury Prevention has published the third edition of the Injuries in Indiana report on injury-related deaths, hospitalizations, and emergency department visits, for the years 2007-2010. The report includes injuries by age and life stages, as well as breakdown by race and gender. In Indiana, unintentional injury is the leading cause of death among persons 1 to 44 years of age and the fifth leading cause of death overall following heart disease, cancer, stroke (cerebrovascular disease), and chronic lower respiratory disease. During 2007-20010, 15,494 Indiana residents died from injury, of which 65 percent were unintentional. There were 90,566 injury-related inpatient admissions and 1,779,650 injury-related outpatient/emergency department visits. The total charges were \$2.57 billion and \$2.53 billion for hospital admissions and outpatient/ED visits, respectively. Injuries can be prevented and their consequences lessened through simple and effective interventions, such as using seat-belts and age-and size-appropriate car seats.

The report can be accessed here: <a href="http://www.in.gov/isdh/files/Injuries\_in\_Indiana\_Report\_2007-2010">http://www.in.gov/isdh/files/Injuries\_in\_Indiana\_Report\_2007-2010</a> Final.pdf

1NJURIES IN INDIANA 2007 – 2010 May 2014



#### Commission on Accreditation for Rehabilitation Facilities

Submitted by Annette Seabrook, MPT, MHA, FACHE, Franciscan St. Francis Health

The Commission on Accreditation for Rehabilitation Facilities (CARF) is an elective, specialty accreditation available for rehabilitation facilities. CARF accreditation demonstrates a provider's commitment to quality services and programs, while focusing on the satisfaction of the person served and their caregivers. Providers must comply with a large number of standards related to the care of the rehabilitation client, including specific areas to address when treating those with a stroke versus brain injury, spinal cord injury or amputation. A large part of the focus is on areas of education/training for the person served and their caregivers, and successfully transitioning them back to their community with adequate resources. CARF involves a multi-day onsite survey and accreditation for existing facilities can be provisional, 1-year or 3-years.

As of April, 2014, there are 22 Inpatient Rehabilitation Facilities (IRFs) in Indiana with CARF Accreditation including:

- Community Foundation of Northwest Indiana Rehabilitation Center
- Daviess Community Hospital
- Elkhart General Hospital
- Franciscan St. Francis Health
- Franciscan St. Margaret Health—Dyer
- Franciscan St. Margaret Health—Hammond
- Good Samaritan Hospital
- IU Health Ball Memorial
- IU Health Bloomington Hospital
- Memorial Rehabilitation Center
- Methodist Hospital (Northlake campus Gary)
- Methodist Hospitals, Inc. Rehabilitation Institute (Merrillville)
- Parkview Rehabilitation Center
- RehabCare Center at Riverview Hospital
- Rehabilitation Hospital of Fort Wayne
- Rehabilitation Hospital of Indiana
- Roudebush VA Medical Center
- Southern Indiana Rehabilitation Hospital
- St. Catherine Hospital
- St. Mary Medical Center (Hobart)
- St. Mary's Rehabilitation Institute (Evansville)
- Union Hospital.

(www.carf.org)

### Firework injuries reporting form

All hospitals and private medical practices are mandated by law to report firework injuries and deaths to the ISDH to be published in an annual report. The 2014 Indiana Firework-Related Injury Report will be assembled and published this fall. The reporting cycle for 2014 lasts from Sept. 13, 2013 through Sept. 12, 2014. Per Indiana Code 35-47-7-7, reports must be completed within five business days after examination of the injury. The 2013 Firework-Related Injury Report can be found at: <a href="http://www.in.gov/isdh/files/ISDH FireworksReport 2013.pdf">http://www.in.gov/isdh/files/ISDH FireworksReport 2013.pdf</a>.

Forms can be found at http://www.state.in.us/isdh/19042.htm#Fireworks.

The law requiring reporting can be found at <a href="http://www.in.gov/legislative/ic/code/title35/ar47/ch7.html">http://www.in.gov/legislative/ic/code/title35/ar47/ch7.html</a>. Forms can be faxed to: (317) 233-8199 Attn: Injury Prevention Epidemiologist or mailed to:

Indiana State Department of Health Division of Trauma and Injury Prevention 2 North Meridian Street Indianapolis, IN 46204

#### Heatstroke deaths of children in vehicles

Based on National Highway Traffic Safety Administration (NHTSA) data from 2012, 38 children die each year from vehicular heatstroke in the U.S. Heatstroke occurs when a person's temperature exceeds 104°F and the body's thermoregulatory mechanism is overwhelmed. Children are at greater risk for vehicular heatstroke because their body temperature rises 3-5 times faster than an adult's. NHTSA also indicates that it takes just 10 minutes for a car to reach deadly temperatures on an 80 degree day, and cracking a car window does not improve inside car temperatures. Male children are disproportionately affected; of all child deaths, male children are more likely to be left in cars and to play in cars, thus putting them at greater risk.

NHTSA provides some tips to prevent heatstroke death:

- 1) *Never* leave children in a vehicle unattended, even with the windows cracked, even "for a minute."
- 2) Always check the backseat when exiting the vehicle (put your phone or your purse in the backseat to create a reminder system). Look before you lock.
- 3) Always keep vehicle doors and trunks locked and keys out of reach.
- 4) Make an agreement with your childcare provider to always call you when your child is absent.
- 5) Call 911 if you see a child alone in a vehicle.

The Children's Safety Network released infographic can be accessed here: <a href="http://www.childrenssafetynetwork.org/sites/childrenssafetynetwork.org/files/">http://www.childrenssafetynetwork.org/sites/childrenssafetynetwork.org/files/</a>
<a href="http://www.childrenssafetynetwork.org/files/">heatstroke infographic pdf print version.pdf</a>
For more information about heatstroke, visit: <a href="http://www.safercar.gov/parents/heatstroke.htm">http://www.safercar.gov/parents/heatstroke.htm</a>
and <a href="http://www.safercar.gov/parents/heatstroke.htm">http://www.safercar.gov/parents/heatstroke.htm</a>



#### Injury Prevention Advisory Council update

The Injury Prevention Advisory Council (IPAC) met for the second time this year on June 12. The IPAC heard a presentation from Dr. Jennifer Walthall, Associate Professor of Clinical Emergency Medicine and Pediatrics and Division Director of EM Pediatrics at Riley Hospital for Children, on her Rough Riders ATV–Safety Project. Rural injuries are on the rise, and children are disproportionately affected. Current policy recommendations include prohibiting use of ATVs by children less than 16 years of age, but young children are still riding and suffering severe injuries and even death. Dr. Walthall discussed the developmental milestones and whether those were sufficient for operating an ATV. The program's proposal includes:

- engaging rural critical access communities regarding ATV safety and use
- pilot an injury surveillance system for ATV-related injury in rural settings
- describe factors influencing ATV injury in children
- develop an approach to reducing ATVrelated injuries among children in rural areas in conjunction with the community and area critical access hospitals
- develop and implement a summer "Safe ATVs" program.



Dr. Walthall explained some of the challenges of beginning an ATV safety program, including disconnects in the population, problem, culture, and worldview. To address these issues, the program focused on messaging and behavioral change theory, which included "qualitative cornhole". The game tested the kids' knowledge about ATVs by asking them true or false questions while throwing bean bags into tires. They were awarded prizes after their responses were recorded. The first phase of the project started at the Sullivan County Night Out. The Rough Riders All-Terrain Experience had a "Passport to ATV Safety" with four stations for children to complete in order to receive a \$25 voucher to spend on a helmet at Jays Auto World. Participants at the event were between the ages of three and 20 years, 56 percent had driven an ATV, and of those, 50 percent started when they were under the age of six. 40 percent reported having seen or heard something about ATV safety in the past year, and 44 percent reported they had heard that ATVs are not meant to carry passengers. The second phase of the study will begin in the fall, 2014. This second phase is the GIS component and will gather data from track stick devices placed on ATVs to follow ATV riders to see how ATVs are driven and conditions children face.

In addition to Dr. Walthall's presentation, IPAC members shared the status and progress of their injury prevention work, and discuss the bylaws and future of IPAC. Updated Terms of Reference will be disseminated to the group for review in the future.

The IPAC is expanding its membership to include more stakeholders from across the state, so new members are always welcome. Jessica Skiba, ISDH injury prevention epidemiologist, has sent all interested partners bi-weekly email updates with important injury prevention articles, news, and resources.

IPAC will meet again Wednesday, September 10 from 10 a.m.-12 p.m. and Thursday, November 20 from 1 p.m.-3 p.m. in Rice Auditorium at ISDH.

If you are interested in becoming a member of IPAC or would like more information about IPAC, contact Jessica Skiba at <u>iskiba@isdh.in.gov</u> or at 317-233-7716.

### Trauma Registry Rule—update

The Trauma Registry rule, signed into law by Governor Pence last October, requires all EMS transport providers, hospitals with emergency departments and the State's seven rehabilitation hospitals to report trauma cases to the ISDH trauma registry. The rule has been effective since November 24. The following EMS services have submitted data to the Indiana Trauma Registry for 2014:

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A&A Township VFD	Huntertown VFD	Randolph County EMS
Aboite Township VFD	IU Collegiate EMS	Richmond FD
Adams County EMS	IU Health—Lifeline	Ripley County EMS
Dams Markleville Fire Protection Terr.	IU Health—Bedford EMTs	Rush Memorial Hospital EMS
Air Methods Corporation / UCAN	IU Health—Bloomington EMTs	Scott County EMS
Air Methods—Kentucky	IU Health—Paoli EMTs	Seals Ambulance Service
Alcoa EMS Warrick—Newburgh	Jay County EMS	South Bend FD
American Medical Response (AMR)	Jefferson Township Ambulance	So. Ripley Co. Em. Life Squad
Batesville Vol. Fire & Rescue Depart.	Keener Township EMS	Spencer Co. EMS
Beech Grove FD	King's Daughters' Health EMS	St. Joseph Township FD
Boone County EMS	LaPorte County EMS	St. Mary's Warrick EMS
Burns Harbor FD	Lutheran Hospital EMS	St. Mary's LifeFlight
Carroll County EMS	Madison Township VFD	Steuben County EMS
City of Gary FD	Marion General Hospital EMS	Sugar Creek Twshp FD
City of Lawrence FD	Memorial Hospital Ambulance	Sullivan Co. Ambulance
City of Nappanee EMS	Milan Rescue 30	Sunman Area Life Squad
City of Rushville FD	Moral Township VFD	Terre Haute FD
Columbus Regional Hospital Ambulance Service	Morgan County Emergency Management	The Methodist Hospitals EMS
Culberson Ambulance Service	New Carlisle Area Ambulance Service	Three Rivers Ambulance Auth.
Decatur Township FD	New Caste/Henry Co EMS	Tippecanoe EMS
DeKalb EMS	New Washington VFD	Town of Plainfield Fire Terr.
Dublin VFD Inc.	Noblesville FD	Town of Schererville
Eli Lilly & Company	North East Allen Co. Fire & EMS	Town of St. John
Fayette County EMS	North Webster/Tippecanoe Twshp EMS	Turkey Creek Fire Terr.
Fountain County Ambulance Service	NW Ambulance Service	Wabash FD
Fulton County EMS	Osolo Emergency Medical	Warren County EMS
Gaston VFD	Parkview Huntington EMS	Washington Twshp/Avon FD
Gibson County EMS	Parkview LaGrange EMS	Wells County EMS
Goshen FD	Parkview Noble EMS	Whiting FD
Grace on Wings	Parkview RMC EMS	Whitley County EMS
Grant County EMS	Perry Co. Memorial EMS	Wolcott Ambulance Service
Greenfield FD	Pike County EMS	Woodburn FD
Hoagland EMS & VFD	Posey County EMS	
Honey Creek FD	Prompt Ambulance Central	

#### Trauma Registry Rule—update

The following hospitals have submitted data to the Indiana Trauma Registry for 2014:

Cameron Memorial	IU Health—Goshen	Pulaski Memorial
Clark Memorial	IU Health—LaPorte	Putnam County
Columbus Regional	IU Health—Methodist	Reid Hospital
Community Anderson	IU Health—Morgan	Rush Memorial
Community Bremen	IU Health—North	Schneck Medical Center
Community East	IU Health—Paoli	Scott County Memorial
Community Howard	IU Health—Riley	St. Anthony—Crown Point
Community North	IU Health—White Memorial	St. Anthony—Michigan City
Community South	Jay County	St. Catherine Regional
Daviess Community	Johnson Memorial	St. Elizabeth—Central
Deaconess Gateway	King's Daughters' Health	St. Elizabeth—Crawfordsville
Deaconess Hospital	Kosciusko Community	St. Elizabeth—East
DeKalb Health	Lutheran Hospital	St. Francis—Indianapolis
Dukes Memorial	Major Hospital	St. Francis—Mooresville
Dupont Hospital	Marion General	St. Joseph RMC—Mishawaka
Elkhart General	Memorial Hospital (Jasper)	St. Margaret—Dyer
Eskenazi Health	Memorial South Bend	St. Mary's of Evansville
Floyd Memorial	Methodist—Northlake	St. Mary's Warrck
Gibson General	Methodist—Southlake	St. Vincent Anderson
Good Samaritan	Monroe Hospital	St. Vincent Clay
Greene County	Parkview Huntington	St. Vincent Indianapolis
Hancock Regional	Parkview LaGrange	St. Vincent Salem
Hendricks Regional	Parkview Noble	St. Vincent Williamsport
Henry County Memorial	Parkview Randallia	Sullivan County Community
IU Health—Arnett	Parkview RMC	Terre Haute Regional
IU Health—Ball Memorial	Parkview Whitley	Union (Clinton)
IU Health—Bedford	Perry County Memorial	Union (Terre Haute)
IU Health—Blackford	Portage Hospital	Witham
IU Health—Bloomington	Porter—Valparaiso	Witham at Anson

The next trauma registry training event will be held at the ISDH located at 2 North Meridian Street, Indianapolis, in Rice Auditorium on July 11. If your facility or service is currently not reporting trauma data to the Indiana trauma registry, please attend this training event. The hospital and rehabilitation facility training session starts at 9 a.m. EDT. The EMS provider training session will start at 1 p.m. EDT. To register for the training event, visit: <a href="https://www.surveymonkey.com/s/GZ875YL">https://www.surveymonkey.com/s/GZ875YL</a>

#### St. Vincent Trauma Center hosts first Advances in Trauma Care conference

St. Vincent Trauma Center invites you to attend the inaugural **Advances in Trauma Care Conference** in **New Castle, Indiana on Thursday July 24.** An outstanding day of education for all pre-hospital and other health care professionals will be presented by experts in the field of trauma to include the topics listed below. The keynote speaker Christina Hernon, M.D., emergency medicine physician at UMASS Memorial Healthcare. Dr. Hernon was volunteering at the Boston Marathon in the race's medical tent when the bombs went off. She will share her personal experience as one of the first medical professionals on the scene treating the wounded. Topics covered include:

Thoracic Trauma Rapid Sequence Intubation Pediatric Trauma
Farm Injuries Orthopedic Trauma Airway Management

Registration is FREE to all attendees. A conference t-shirt, continental breakfast and catered lunch will be provided with raffle items to include an IPAD and \$100 gas card. Continuing education credits available. Register at: <a href="http://www.eventbrite.com/e/advances-in-trauma-care-conference-tickets-10116216877">http://www.eventbrite.com/e/advances-in-trauma-care-conference-tickets-10116216877</a>. For more information please contact Judi Holsinger at jholsing@stvincent.org.







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## 2011 Fatality data now available on WISQARS

Centers for Disease Control and Prevention's Web-based Injury Statistics Query and Reporting System (WISQARS) has been recently updated to include 2011 data from the National Vital Statistics System. The data are now included in the following WISQARS modules: Fatal Injury Reports, Leading Causes of Death, and Years of Potential Life Lost (YPLL). The updated WISQARS can be accessed here: <a href="http://www.cdc.gov/injury/wisqars/">http://www.cdc.gov/injury/wisqars/</a>

### National inaugural injury prevention coordinators symposium

The Trauma Prevention Coalition is hosting the first summit for injury prevention coordinators on Wednesday, September 10 from 7 a.m.- 11:15 a.m. at the Philadelphia Marriott Downtown during the 73<sup>rd</sup> Annual Meeting of the American Association for the Surgery of Trauma. The symposium will include an update on the Trauma Prevention Coalition, a review of the Prevention chapter in the updated Resources for Optimal Care of the Injured Patient from the American College of Surgeons Committee on Trauma (Orange Book), and an overview of the newly developed Injury Prevention Coordinators Course Curriculum. The symposium will include a panel to discuss issues associated with hospital-based injury prevention and intervention programs and the specific needs of injury prevention coordinators in trauma programs.

To register, visit: www.aast.org (click on annual meeting tab).

For more information about the symposium, contact: Glen Tinkoff, MD (<a href="mailto:gtinkoff@christianacare.org">gtinkoff@christianacare.org</a>)or Tamara Jenkins (<a href="mailto:tjenkins@aast.org">tjenkins@aast.org</a>) (312) 202-5468

### ISDH Division of Trauma and Injury Prevention display

The ISDH Division of Trauma and Injury Prevention staff recently attended the Indiana Rural Health Association conference and set up their trauma system display. If your organization or association is interested in having the division staff attend your upcoming event to answer questions and concerns about the development of the statewide trauma system, please contact Katie Gatz, kgatz@isdh.in.gov.



Camry Hess, Database Analyst Epidemiologist, Jessica Skiba, Injury Prevention Epidemiologist, and Murray Lawry, EMS Registry Manager, answer conference attendees questions about Indiana's trauma system.

# Trauma Times Survey

Trauma Times wants your feedback! Please take this short survey to help us serve your needs: <a href="http://www.surveymonkey.com/s/WYY6TRJ">http://www.surveymonkey.com/s/WYY6TRJ</a>

## Trauma Registry Reports

The Indiana Trauma Registry produces regular reports on a monthly, quarterly and annual basis. In addition, certain ad hoc reports are produced upon request. These reports are archived on our web page and can be accessed at <a href="http://www.in.gov/isdh/25581.htm">http://www.in.gov/isdh/25581.htm</a>.

William C. VanNess II, M.D.—
State Health Commissioner
Art Logsdon—Assistant Commissioner, Health
and Human Services

Division of Trauma and Injury Prevention: Katie Gatz—Director Jessica Skiba—Injury Prevention Epidemiologist Camry Hess— Trauma Registry Data Analyst Murray Lawry— EMS Registry Manager